

BEST AVAILABLE COPY

CLAIMS ONLY								Application Number <div style="font-size: 1.5em; font-family: cursive;">09893991</div>		Filing Date	
								Applicant(s)			
* May be used for additional claims or amendments											
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
		Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend
1	1							51			
2	cancel							52			
3								53			
4								54			
5								55			
6								56			
7								57			
8								58			
9								59			
10								60			
11								61			
12	cancel							62			
13								63			
14								64			
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39								89			